

Technical Assistance Paper Adult Learning Plan (ALP)

Purpose

All recipients of federal and state adult education funding are required to maintain the Adult Learning Plan for all adult education participants. The ALP is designed to gather required information that is helpful in enhancing the academic and economic success of the adult participant.

The ALP is to be completed by a program-designated staff member (i.e., teacher, counselor) working with the participant. It is highly recommended that the ALP be a working document initiated during the intake process. It is an integral, but not all-inclusive part of the participant registration process.

This technical assistance paper provides the practitioner with the information needed to complete the ALP.

ALP Requirements

- All adult education programs must use the ALP format provided effective Program Year 2012-13 (July 1, 2012).
- The Adult Learning Plan is initiated upon intake and utilized for the entire duration of the participant's adult education services across program years.
- Pages 1-3 are required to be completed and must be on file for each participant.
- Unless noted with an asterisk (*), all information is required. Data items with an asterisk (*) are optional.
- The shaded fields are data items reported at ENTRY which remain unchanged during the entire duration of the registration period.
- ALP Addendum pages are optional. These pages are designed to obtain a better understanding of the participant and assist in developing a plan of action for addressing barriers.
 - Barriers to Success
 - Educational Inventory, Personal Characteristics and Abilities, and Career Interests
- AN AGENCY CANNOT CHANGE THE CURRENT FORMAT/STRUCTURE OF THE REQUIRED FIELDS AND RESPONSES. Additional information that individual program providers wish to obtain could be added to the available space on the ALP, or attached as a separate page.
- Program providers may choose to copy the ALP as needed, i.e., one-sided, two-sided, tri-folded on 11"x17" paper.
- Participant identification information is located at the top of each page in the event pages are separated.

ALP Field Elements

Following are the ALP field elements and data entry requirement descriptions.

*Completion - Optional

Shaded Items: Data reported at ENTRY which remains unchanged during registration period.

PAGE 1	
Program Year	Enter the NRS program year in which the ALP is initiated at entry
Planned End of Service Date	Enter the estimated date for which all adult education services will be completed by and the participant will be exited
Program Provider Code	Enter provider code (district/recipient code)
Provider Name	Enter legal name of provider
Registration Date	Enter the actual date the participant registered for the program. Note: MAERS will not accept a registration date prior to July 1 of a program year, therefore, enter July 1 as the registration date in MAERS if the individual registered before July 1.
Local Student Number	Enter local student number. This is a locally assigned 4-10 character field that is unique to each participant within a fiscal agent.
*Social Security Number	Optional. Enter the social security number of the participant. It is strongly recommended that a participant's social security number be obtained, as this will be critical for effective tracking/follow-up of participant outcomes through data matching.
*Unique Identification Code (UIC) Number	Optional. UIC number identifies each student in Michigan with one unique student identifier. The Michigan Student Data System allows school districts to obtain or validate (UICs) for their students. UIC numbers will also be critical for effective tracking/follow-up of participant outcomes through data matching within the Center for Educational Performance and Information System, which requires UIC numbers.
Participant Name	Enter participant name (last, first and middle initial)
*Maiden Name	Optional. Enter participant's maiden name, if applicable.
Address	Enter current address of participant (address, city, state and zip code). Check the box if there is no address available for the participant.
County	Enter the county in which the participant lives.
Telephone Number and Alternate Phone Number	Enter participant's telephone number and, if available, an alternate phone number to be using for contacting the participant.
Email	Enter current email address for participant, if available.
Date of Birth	Enter the participant's date of birth (mm/dd/yyyy).
Age	Enter the participant's age on the day of registration/intake
Place of Birth	Enter the participant's place of birth (city and state for U.S. born individuals OR city and country for non-U.S. born individuals)
Sex	Indicate whether the participant is male or female.
*Alternate Contact Information	Optional. Enter alternate contact information of an individual not living in the participant's household. Enter last and first name, relationship to participant, current address (address, city, state and zip code), current telephone number and email address (if available). (Note: last and first name and relationship to participant are required fields if alternate contact information is entered into MAERS)
Eligibility/ID Verification	Indicate the eligibility/ID verification documentation on file. NOTE: Copies of eligibility verification documentation must be kept on file for each participant, i.e., driver license, birth certificate, State ID card, participant transcript, passports, INS papers, green card.
Number of Preschool-Aged Children	Enter the number of preschool-aged children that the participant has (typically under the age of five).
Number of School-Age Children (K-12)	Enter the number of children that the participant has who are eligible for or are enrolled in K-12 classes.

Ethnicity	Participants must self-identify as Hispanic/Latino or not Hispanic/Latino ethnicity, regardless of their racial background. Hispanic or Latino: A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
Racial Group	<p>Participants must select one or more races with which they identify:</p> <ul style="list-style-type: none"> ▪ Black or African American: A person having origins in any of the Black racial groups of Africa. ▪ American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment. ▪ Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. ▪ Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. ▪ White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
Highest Degree or Level of School Completed at Entry (US or Non-US)	<p>Select the HIGHEST degree or level of school the participant has completed at entry into the adult education program. Indicate whether the highest degree or level of school was US Based Schooling or Non-US Based Schooling.</p> <p>For ESL participants: If a high school diploma/alternate credential from non-US based schooling is the highest degree or level of school completed and proof (transcript) cannot be provided, please select "Grades 9-12 (no diploma)."</p>
Additional Status Measures at Entry	Select all additional status measures which apply at the time of entry. (See the NRS Guidelines for a complete explanation for each measure.)
Labor Status at Entry	Select the labor status of the participant at the time of entry (Employed= individual is currently employed. Unemployed=individual is not employed and looking for work. Not in the Labor Force=individual is not employed and NOT looking for work.)
*Employer's Name	Optional. If employed, indicate the employer's name.
*Hourly Wage at Entry	Optional. If employed, indicate the participant's hourly wage at the time of entry. (self-reported)
High School Diploma Credits at Entry	<p>Indicate the number of transferable HS diploma credits the participant previously earned at entry, as determined by the district providing the adult education services.</p> <p>Indicate the number of credits required for completion of a HS diploma by the district.</p>
GED Tests at Entry	<ul style="list-style-type: none"> • Indicate the OSSID Number, if known. • Indicate the total number of <u>actual</u> GED tests previously passed at entry. • Optional. *Indicate the total number of practice GED tests previously passed at entry.
Instructional Area	Select the instructional area. For High School Diploma, indicate if MMC requirements are being followed.
Date of Class Enrollment	Enter the first scheduled day of class that the participant is enrolled in. If enrolled in more than one class, enter the earliest date.
Program Funding Source(s)	Identify which funding source(s) will be charged for the participant's instructional expenditures. Note: participant must meet required eligibility criteria.
Program Type	If applicable, select which type of program the participant is enrolled in.
Support Services	If applicable, indicate which support services are being provided to the participant.

*State Aid FTE	Optional. If State School Aid – Section 107 was selected as a funding source, select which count date(s) the individual is reported for participant eligibility and the amount of FTEs reported for each count date.
Verification of Participant Involvement	In lieu of signatures, agency must verify that the participant was actively involved in the ALP process and the selection of all goals. Provide the name and title of the agency official verifying this statement, and the date verified.
PAGE 2 – ASSESSMENTS	
<p>The tracking of assessment data is required for all participants.</p> <p>Programs are required to assess all participants (ABE, GED, HSC, ESL) at entry prior to instruction (pre-test) and no later than June 30 of the program year, as long as the participant meets the minimum number of hours required to post-test.</p> <p>Please refer to the Assessment Policy for testing requirements.</p>	
Assessment Type	<p>Identify which Office of Adult Education approved assessment was administered to the participant. Effective July 1, 2011, the approved assessment tests are CASAS, TABE 9/10, GAIN and WorkKeys.</p> <ul style="list-style-type: none"> ▪ If CASAS, indicate the series name. ▪ If TABE 9/10, indicate whether it was the survey or complete battery. ▪ Work Keys <p>The TABE Locator must be administered to new participants. The CASAS Appraisal is highly recommended. The TABE Locator and the CASAS Appraisal <u>cannot</u> be used as official pre- and post-tests.</p>
Date Test Administered	Identify the <u>actual</u> date the assessment was administered.
# of Instructional Hours Since Last Test	Indicate the number of instructional hours the participant received since the last time the assessment was administered. Please refer to the Assessment Policy for testing requirements.
Module	Identify the module name of the assessment administered.
Form # /Level	For CASAS, identify the form number of the assessment administered. For TABE, identify the version (9 or 10) and the level of the assessment administered (L, E, M, D or A).
Scale Score	Indicate the SCALE score from the assessment administered. CASAS and TABE 9/10 are three-digit scale scores, and Work Keys is a two-digit scale score.
Educational Functioning Level	Indicate Educational Functioning Level based upon assessment score.
Grade Level	If applicable, indicate grade level based upon assessment score.
Post-Test Minimum Hour Requirement Waiver	<ul style="list-style-type: none"> • Waiver to administer the post-test prior to the minimum number of hours required • Participant must have either obtained the HS Diploma or GED <u>prior</u> to administering the post-test. • This <u>does not</u> waive the requirement to post-test. <p>If applicable, indicate if the participant either obtained the HS Diploma or GED prior to the post-test minimum requirement. Provide the date the wavier was granted, and the name and title of program official authorizing the wavier.</p>

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Participant Goals	<p>Select as many primary and secondary goals as applicable, and the program year(s) the goal was selected. All goals must be selected with the participant. (Goal selection does not determine performance or follow-up requirements.)</p> <p>Please refer to the Goal Setting Policy for detailed information.</p>
Participant Outcomes	Check all primary and secondary outcomes achieved by the participant and the program year(s) the outcome was achieved.
Section 107 Performance Objectives Achieved Not Identified in Participant Achievement section	If applicable for a Section 107 funded participant, indicate if the participant achieved a Section 107 performance objective not identified in the Participant Outcome section. All performance information is reported on the Section 107 Performance Report.
High School Diploma Credits at Exit	Enter the total number of High School Diploma credits the participant earned at Exit from all adult education services.
GED Tests at Exit	<p>Enter the total number of actual GED tests TAKEN by the participant at Exit from all adult education services.</p> <p>Enter the total number of actual GED tests PASSED by the participant at Exit from all adult education services.</p>
Exit Status (End of Service)	<p>The participant exit status is reported when the participant has exited from ALL adult education services.</p> <p>Participant Completed and Does Not Plan to Continue – Participants who made an educational gain or achieved their goal and do not plan to continue in the program.</p> <p>Participant Separated Before Completion - Participants who separate from the program prior to the end of a program year and did not receive services for 90 days, without having made an educational gain or achieved their goal. If this exit status is selected, a Reason for Separation is required.</p> <p>Enter the date that the participant was exited from all adult education services.</p>

Addendum to Adult Learning Plan (Optional)	
Barriers to Success	Identify all barriers to success, along with a plan of action to address these barriers. Program providers may choose to provide the participant with a list of available resources, as needed, as being the plan of action.
Addendum to Adult Learning Plan (Optional)	
Educational Inventory	These questions are designed to help define a participant's learning style. Research-based learning has shown that educational inventories can assist in identifying learning styles, which are an important part of a learning program. <i>Additional fields may be added.</i>
Personal Characteristics and Abilities	Personal characteristics and abilities are factors in learning. Research-based learning has shown that personal characteristics are an integral part of a participant's learning style. <i>Additional fields may be added.</i>
Career Interests	Career interest and ability questions are designed to help develop a career path for a participant. This field is designed to provide a participant with direction in the area of career interests. This field is not viewed as an aptitude or career assessment, but rather an area of interest or focus. <i>Additional fields may be added.</i>